



Petition for Zoning Change

Township of Acme, Grand Traverse County, Michigan

6100 US 31 N, Williamsburg, MI 49690

Phone: (231) 938-1350 Fax: (231) 938-1510 Web: www.acmetownship.org
Planning & Zoning Administrator: Lindsey Wolf Email: zoning@acmetownship.org

Please fill out the following application as completely and legibly as possible:

A. Owner/Applicant Information:

Owner/Applicant's Name: _____

Owner/Applicant's Current Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

B. Required Information (attach additional pages as needed):

1. Property Address/Location: _____
2. Parcel Number: _____
3. Proof of current property ownership. If applicant is not the current property owner, also provide written and signed permission for applicant to act as agent of, and complete contact information for, the current property owner.
4. Sealed survey and legal description for property proposed for rezoning.
5. State the current zoning designation, proposed zoning designation and why you are petitioning for and believe that the property should be rezoned.
6. Describe the natural features and characteristics of the property.
7. Describe the existing land use on the property and on all immediately neighboring properties.
8. State whether deed restrictions exist on the property. If so, provide documentation. Discuss how they do or would affect the use of the property.

C. Submission Requirements (additional items may be requested depending on the circumstances):

1. Signed original copy of this application form.
2. Signed original copy of Fee Escrow Policy Acknowledgement
3. Initial fee as required by Acme Township Schedule of Fees
4. PDF files for all application materials and attachments
5. CAD and/or GIS shapefiles for area proposed for rezoning
6. If you have prepared any oversized site plans or documents, provide 10 copies of each

D. Affidavit:

The undersigned affirms that he/she is the _____ (owner, agent, lessee, or other interested party) involved in this petition and that the foregoing answers, statements and information are in all respects true and, to the best of his/her knowledge, correct. By making this application, the undersigned grants all officials, staff and consultants of Acme Township access to the subject property as required and appropriate to assess site conditions in support of a determination as to the suitability of the proposed project and/or current or future special use permit and zoning ordinance compliance.

Signature: _____ **Date:** _____

FOR TOWNSHIP USE ONLY

Application No.: _____

Date of Advertising: _____

Date Received: _____

Date of Hearing: _____

Fee Tendered: _____

PC Recommendation: _____

Board Action: _____

Effective Date: _____

NOTES